

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PT-57)**

SERIAL NO.
04630
APPLICANT

448

FILED DATE
8-2-00

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	NO.	DEF.	NO.	DEF.	NO.	DEF.
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50						
TOTAL	4					
TOTAL	4					
TOTAL	8					

	NO.	DEF.	NO.	DEF.	NO.	DEF.
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